

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 21, 2006 08:00 A
Secretary of State

DOCUMENT # M01000000710
 1. Entity Name
 KISSIMMEE VALUE OUTLET SHOPS, L.L.C.



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|--|--|
| Principal Place of Business 481 CARLISLE DR. HERNDON, VA 20170 | Mailing Address 481 CARLISLE DR. HERNDON, VA 20170 |
|--|--|



01172006 No Chg-LLC CR2E083 (11/05)

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|---|--------------------------------|
| 4. FEI Number 54-0796577 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent
 CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE, FL 32301-2525

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2006

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGRM UNION LAND & MANAGEMENT 481 CARLISLE DR HERNDON, VA 201704830 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR BAKER, DANIEL R 481 CARLISLE DR HERNDON, VA 201704830 |
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 04/06/06-80001-012 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date: _____ Daytime Phone # _____